

**APPLICATION DATA SHEET****Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?::  
Title:: Glycyrrhizin or Derivatives Thereof for Treating or  
Preventing Severe Acute Respiratory Syndrome  
(SARS)  
Attorney Docket Number:: SONN:086US  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 2  
Small Entity:: Yes  
Petition Included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Number::  
Secrecy Order in Parent Appl?:: No

**Inventor Information**

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: Czech Republic  
Status: Full Capacity  
Given Name:: Jindrich  
Middle Name::  
Family Name:: Cinatl  
Name Suffix::  
City of Residence:: Offenbach a.M.  
Country of Residence:: Germany  
Street:: Carl-Maria-von-Weber-Str. 2  
City:: Offenbach a.M.

State or Province::  
Country:: Germany  
Postal or Zip Code:: 63069

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status: Full Capacity  
Given Name:: Hans  
Middle Name:: Wilhelm  
Family Name:: Doerr  
Name Suffix::

City of Residence:: Dreieich  
Country of Residence:: Germany  
Street:: Breitseeweg 21  
City:: Dreieich  
State or Province::  
Country:: Germany  
Postal or Zip Code:: 63303

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status: Full Capacity  
Given Name:: Gerold  
Middle Name::  
Family Name:: Hover  
Name Suffix::  
City of Residence:: Offenbach a.M.  
Country of Residence:: Germany  
Street:: Luisenstr. 51  
City:: Offenbach a.M.  
State or Province::  
Country:: Germany  
Postal or Zip Code:: 63067

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status: Full Capacity  
Given Name:: Martin  
Middle Name::  
Family Name:: Michaelis  
Name Suffix::  
City of Residence:: Frankfurt a.M.  
Country of Residence:: Germany  
Street:: Marie-Luise-Kaschnitz-Str. 2  
City:: Frankfurt a.M.  
State or Province::  
Country:: Germany  
Postal or Zip Code:: 60439

#### **Correspondence Information**

Correspondence Customer  
Number:: 32425  
Telephone:: (512) 536-3035  
Fax:: (512) 536-4598  
Email address:: mbwilson@fulbright.com

#### **Representative Information**

Representative Customer  
Number:: 32425

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IB2004/002393	06/07/04
PCT/IB2004/002393	Claiming the benefit under 35 USC 119(e) of	Appl. No. 60/476,908	06/06/03

**Assignee Information**

Assignee Name::	Johann Wolfgang Goethe University
Street::	Senckenbergallee 31
City::	Frankfurt am Main
State or Province::	
Country::	Germany
Postal or Zip Code::	60325